CARES Monthly VISN Communication Report January 2003

The VISN-level CARES Communication Report for January 2003 is summarized on the attached spreadsheets. The first spreadsheets contains the "Stakeholder Outreach" summary; the second spreadsheet includes the unsolicited input or inquiries received from the stakeholders and others, and the third contains the summary of substantive comments from the VISNs.

In summary, there were 437,267 stakeholders, veterans, and members of the public briefed on the CARES process. This represents a total decrease of 609,909 stakeholders and veterans briefed as in December 2002. For this month, all VISNs submitted CARES Stakeholder Outreach information. Most of the VISNs used communication modes consisting of briefings, websites, e-mails and mailings (e.g., brochures, newsletters). Of the 121,044 Veterans & Relatives contacts, 99,254 or nearly 82.0% were from VISN 20, mainly in the form of newsletters and publications. Of the 242,125 Employee contacts, 152,679 or nearly 63.0% were from VISN 2. Of the 6,797 volunteer contacts, 2,000 or 29% were from VISN 22. Finally, of the 43,900 VSO contacts, 36,210 or 82.5% were from VISN 17 – mostly in the form of briefings.

Overall, of the 437,267 total stakeholders and veteran's contacts 20,799 or nearly 4.76% were in the form of mail outs (e.g., e-mails, brochures, newsletters,).

Concerns continue to be voiced in the majority of the VISNs focused on the overall CARES process (i.e., Congressional involvement, funding, and impact), employee anxiety, potential closures, and special populations. In meetings with national VSO representatives at the VHA-VACO levels, a concern continues to be voiced that there has been insufficient contact to local, state, and regional VSO representatives regarding the CARES process.

Additionally, of the 437,267 total stakeholders contacts, 77 or .0176% were face-to-face outreach contacts.

Several areas were identified for improvement in the communication reporting process. These are summarized below.

 The decrease in the number of stakeholders briefed in January may be result of the VISNs working on their planning initiatives. VISNs must submit their Market Plans by April 15, 2003.

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CARES Outreach Monthly Report

ALL VISNs January 2003

					C	outreach Au	ıdience				
VISN	Employee	Veteran/Rel	Congressional	VSO	Affiliate	Volunteer	Union	Local Org	ОоО	Other	Total
0	16	0	5	35	0	0	0	0	30	70	156
1	9734	936	112	683	21	4	33	3	1	8	11535
2	152679	106	2	123	0	136	0	14	0	0	
3	7171	392	25	424	60	526	129	98	72	11	8908
4	10746	418	156	598	17	99	8	7	0	114	12163
5	7738	335	55	90	1	25	34	5	56	10	8349
6	7101	190	133	275	27	384	12	35	15	6	8178
7	1815	4600	7	1008	52	120	0	53	10	66	7731
8	360	13	20	186	0	0	6	20	0	70	675
9	4451	86	38	426	12	0	17	0	0	18	5048
10	671	8	0	34	16	0	4	0	0	0	733
11	1040	1000	0	79	20	856	113	0	0	100	3208
12											0
15	1370	29	5	301	0	0	7	57	0	20004	21773
16	736	10006	2	1786	0	67	21	1	0	231	12850
17	15460	1002	1	36210	0	939	2	0	9	0	53623
18	3229	2017	3	32	0	41	318	0	0	0	5640
19	561	9	11	332	1	510	11	4	2	16	1457
20	1993	99254	4	367	4	0	22	100	60	15	101819
21	3167	70	25	69	44	337	25	30	8	4	3779
22	7510	155	12	189	30	2000	20	12	0	10	9938
23	4577	418	53	653	4	753	18	111	11	46	6644
	242125	121044	669	43900	309	6797	800	550	274	20799	437267

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		Contacts													
VISN	Employee	Veteran/Rel	Senator	Representative	VSO	Affiliate	Volunteer	Union	Local Org	DoD	State Gov	Local Gov	Media	Other	Total
0			1												1
1	1				2						2				5
2															0
3	1				5			2						1	9
4		1	1	2	2										6
5		1											1		2
6		3			4							1		1	9
7							1								1
8															0
9					1										1
10	4		1												5
11															0
12 15 16 17															0
15		1			1									5	7
16		1													1
17					2										2
18														2	
19	2				2		2								6
20	2	1	1											1	5 5
21		3									1			1	
22				1	2										3
23		2	1		1				1			1		1	7
	10	13	5	3	22	0	3	2	1	0	3	2	1	12	77

Summary of Substantive Comments for all the VISNs

From: January / 2003 To: January / 2003

Facility	Who	What they said	Action taken / Impact on plan
10NCares	Constiuent James Montgomery of Freeport, PA	Information on overhead cost for VA hospital, if closed due to CARES process	CARES, once completed VA will have national plan for directing resources where most needed. Referred Senator Santorum and Mr. Montgomery to CARES website.
Alaska HCS	Liz Connell, staff person for Senator Stevens	Inquiring where our proposed construction project fits into the CARES process	Information given by 00. No impact on plan.
Cincinnati, OH	Newsletter to all employess.		
Cincinnati, OH	Meeting with Western market to explain the CARES process and next steps.		
Clarksburg, WV	Angela Ohm, Legislative Aid to Congressman Alan Mollohan	"I am trying to understand this process, so I still have a few questions for you." 1) In 2022 there is a decrease in primary care, inpatient surgery and inpatient medical. Yet you stated that Clarksburg does not enter into any area of concern for an identified gap. Why is that? Are the decreases too small to justify action or is there some other reason? 2) I noticed that in 2022, Clarksburg will be just under the 40 bed small facility limit. Why is Clarksburg not being affected by that finding? Is it just that we are only one bed under, while the other facilities are missing the mark by a much wider margin? 3) Thus far do you anticipate that there will be any reduction or redistribution (to another VA facility or local provides) of the services that Clarksburg provides?	
Columbus, OH OPC	All Congressional Offices representing Central Ohio, including, Congressman Hobson, Tiberi, and Congreswoman Pryce. Also representatives, from Senator Dewine and Voinovich	Concerned Central Ohio is being overlooked in CARES process. Expressed interest in what is going to happen in Central Market, especially since no VAMC is located in Columbus, 15th largest city in the U.S.	VISN 10 Office is arranging meeting with the Central Ohio Market Representatives.
Denver, CO	ECHCS employees	Seeking Updates	Updates provided
Dublin, GA	Volunteer is former VSO	Requested update on CARES; could not attend scheduled meeting	Provided updated info

Fargo, ND	Mr. Ronald Conley, National	stated general concerns about CARES	Discussion with Director/COO and staff
	Commander American Legion		
Fargo, ND	Mr. Arvid Clementson Mayor of Fosston MN	interested in opening a CBOC in Fosston MN	will attend MAC meeting at Fargo VA on February 6, 2003 to discuss CBOC
Long Beach, CA	Mary Amos	Is VA privatizating healthcare for veterans?	Provided information on CARES, no plan to contract out health care to private care
Manchester, NH	DAV dept of NH commander DR. Brian Matchett	Complained that CARES data was not accurate	Worked with Larry Devine, and VISN CARES officials to address Dr. Matchetts concerns
Mountain Home, TN	VSOs, veterans, employees were briefed on Service Delivery Options (SDO).	Where will the funding come from; contracting out will be very expensive; review system and eliminate veterans coming in for medicines only; liked plan of additional outpatient clinics.	Comments reported to VISN office by e-mail; group supportive of SDOs.
Northport, NY	Rudolph DiChristina	Would like the VA to build a hospital in Nassau County	It was explained that the CARES model considers proximity of acute care facilities to veterans in a given market and that the Northport VA Medical Center was found to meet the proximity requirements for veterans in the LI market. Mr. DiChristina acknowleded that he understood what I was reporting, but indicated he would seek Congressional support for a Nassau-based hospital.
Northport, NY	Charles Kilbride	He said that he would like the VA to consider occupying vacant space at Nassau County Medical Center to provide skilled nursing care to veterans.	I told Mr. Kilbride that the current number of nursing home beds the Northport VAMC can count under the CARES model would indicate that we had a sufficient number to meet the current projected demand. I told him that the data was being rerun with 2000 census data and that I would let him know if the projected demand changed significantly enough to warrant additional NH beds. I also stressed that if additional resources were needed in any of the areas, they would have to be planned for according to need and available resources.
Northport, NY	Dennis O'Connel, President of the NYS Blind Veterans Association	Mr. O'Connel asked me if I was going to the CARES V-Tel meeting in the Bronx on Feb 3rd.	Told Mr. O'Connel I would be away at training, but put him in touch with the CARES coordinator for Npt.(Phil W.)
Perry Point Division	Reporter from The Star Democrat, Easton, Maryland	Wanted to find out more information regarding the Planning Initiative for upgrading the Nursing Home Care Unit at the Perry Point VA Medical Center.	Responded to the reporters question and provided information about the Market Plans that are being developed.

Philadelphia, PA	Herb Reubel	Reuqested brief overview of CARES Process. Specifically concerned with contracting out Inpatient Care of SC Veterans and inquiered into any difficulties with transportation fo	
Sierra Nevada HCS	Unknown	veterans to and from treatement sites	
Southern Arizona HCS	National Commander for the JWV of U.S.A., total 10 stakeholders.	it sux General overview of the CARES Phase II initiative.	Neutral, general information.
Southern Nevada Healthcare System	State Commanders Meeting		Briefing given during meeting
St. Louis, MO	Unidentified Missouri Association of Veterans Service Organizations Member	I have heard that the VA+Choice plan was already available . When will it start in VISN 15?	Medical Center Director responded that regulatory details are being worked out and the estimated date for signing up veterans under VA+Choice would be July or later.
St. Louis, MO	Unidentified Missouri Association of Veterans Service Organizations Member	I have heard that the VA+Choice plan was already available . When will it start in VISN 15?	Medical Center Director responded that regulatory details are being worked out and the estimated date for signing up veterans under VA+Choice would be July or later.
St. Louis, MO	Unidentified Missouri Association of Veterans Service Organizations Member	After briefing commented to VAMC St. Louis Medical Center Director "I hope your CARES plans are not cast in stone because if we go to war you will have many more veterans seeking care."	VAMC St. Louis Medical Center Director responded that "Planning is a way to look ahead and develop strategies to deal with what we can foresee. Plans are updated regularly and therefore not "cast in stone".
St. Louis, MO	Unidentified Missouri Association of Veterans Service Organizations Member	After briefing, commented to VAMC St. Louis Medical Center Director "I think it is discriminatory to exclude priority 8 veterans from receiving healthcare benefits. Veterans won't stand for it. VA should not penalize those who come back and are successful."	VAMC St. Louis Medical Center Director responded that she would pass the comment on.
St. Louis, MO	VAMC St. Louis volunteer and member of VAMC St. Louis Swimming Pool Committee	After briefing, commented to VAMC St. Louis Medical Center Director "Why can't Jeffeson Barracks Park be purchased to expand the cemetery. Why do we have to demolish buildings on the VA campus. That will cost a lot of money."	VAMC St. Louis Medical Center Director responded that "Only buildings which are no longer needed would be demolished to make more room for the cemetery. Buildings not used become a safety concern and would have to be demolished alone for safety."
St. Louis, MO	Unidentified Missouri Association of Veterans Service Organizations Member	After briefing, commented to VAMC St. Louis Medical Center Director "Why are we demolishing buildings that only recently were earthquake proofed for millions of dollars. Are all those dollars going to go down the drain?" Response: "Only patient care buildings were earthquake proofed and they will continue in use."	Director's response: "Only patient care buildings were earthquake proofed and they will continue in use."

Temple Division	National Headquarters for the	Concerned that we are closing Marlin VA	Explained that we are not closing the hospital, have
	American Legion	hospital and wanted to know if this was part of the CARES process	realigned the nursing home care program from Marlin to Temple and intend to keep outpatient care at Marlin. No impact on CARES plan.
Temple Division	Brown County Veterans Service Officer	Said a veteran wanted to know if CARES was going to bring inpatient beds to the Brownwood area.	Explained that Brownwood area does not meet the CARES criteria for inpatient beds. No impact on plan.
Togus, ME	Joe Cooney, American Legion Commander, So. Paris.	Expressing interest in having a CBOC in this western Maine community.	We have included initiative to improve access in western Maine.
VA Black Hills HCS	Michelle Leach, Administrator for Sioux San Hospital/Indian Health Service	Wants to be part of the planning team	Invited to future South Dakota CAMP Team meetings
VISN 1 Office	Boston HCS employee	Detailed concerns related to health care needs of elderly patients, including access to primary care, waiting times, transportation issues, availability of neuropsychological services, pharmacy services, mental health and palliative care needs.	Notified individual that comments were referred to East Market team for consideration.
VISN 10 Office	Visn 10 CARES council met to discuss the CARES Planning Initiatives and the next steps needed.		
VISN 22 Office	Jessy James Morales	He was pleased to be working with us and looked forward to future updates.	Continue to keep him informed and involved in the CARES process.
VISN 3 Office	Ms. Ena Judd-Thompson (Principal Union Official for the VISN)	Ms. Judd was having difficulty accessing the IBM Planning Model training account.	We were able to establish an account for her and give her a user name and password which resolved the problem.
VISN 3 Office	Gerard M. Kelly, Executive Director	External VISN collaboration and to be kept abreast of all developments regarding CARES.	Replied to letter acknowledging their concerns and will take action to ensure multi-VISN collaboration on SCI issues. We have been keeping the EPVA actively involved in the CARES process.
VISN 3 Office	Mike Suter, Chair VS&R New York State leadership	Mr. Suter and Perry Danner had a briefing and discussed the specific proposed solutions identified by the VISN 3 facilities, new timeframes, release of the rerun data and special population data, discussed the IBM planning model in detail.	Mr. Suter was invited to participate in the VISN 3 IBM Planning Model Briefing and will continue to have open discussions with all stakeholders.
VISN 3 Office	Deputy Secretary Leo S. Mackay, Ph.D., site visit to VA Hudson Valley Healthcare System (Castle Point and Montrose Campuses). Castle Point is on the less than 40 bed acute care hospital planning initiative.	Dr. Mackay met with employees at the Castle Point campus, and had a private lunch with numerous non-managerial staff to have a candid discussion. Dr. Mackay also went to the Montrose campus and had discussions with staff regarding Enhanced Use and CARES.	Follow-up on discussions regarding the proposed Enhanced Use project.

VISN 3 Office	Leadership of the EPVA	During our Stakeholder meeting to discuss the	Shortly after this meeting - the timeframes were
VIOIV O OIIIOC	Loaderonip of the Er V/	planning initiative solutions, several comments	extended until 2/14 to receive the specialty care
		were made regarding the fact that we were	data/PI's and April 15 to finalize the VISN level market
		moving forward without all of the data -	
			plan.
		specifically the SCI data and PI's and to a	
///ON 0 O(!)		lesser degree the LTC data/PI's.	
VISN 3 Office	Ena Thompson-Judd, Union	Requesting a copy of all proposed solutions to	Sent Ms. Judd a copy of the comprehensive
	President representing the	planning initatives for review and discussion at	coordinated facility level planning initiative solutions.
	VISN 3 AFGE leadership.	the VISN 3 AFGE Union meeting.	
VISN 4 Office	State BVA contact	requested BRSO be added to both market	Called and discussed; both groups are open to
		groups to address special population PI's	representation, but there are currently no VISN level PI's
			for Blind Rehab.
VISN 4 Office	Veteran	Stated they were encouraged that process will	Will share with East and West taskforces.
		take into consideration where the veteran lives.	
		Stated VA should consider contracting out to	
		local hospitals near him, so that if he ever has	
		to be admitted or need LTC, that it will be	
		easier for family to visit if services provided	
		locally rather than at VAMC	
VISN 6 Office	Blue Ridge Advocates for	Asked how vet. pop. data was gathered; asked	Asheville added them to mailing list for CARES
71017 0 011100	Veterans Outreach Services (4	how many CBOC's will be developed; asked	information.
	members via conference call)	about CARES process; asked if western NC is	information.
	members via conference can	considered rural or urban; asked if veterans'	
		ages are a factor in CARES; Group stated they	
		9	
		are excited about CARES and stated they will	
		write a resolution in support CARES and a	
		CBOC for western NC.	
VISN 6 Office	Dolores Dunn, HVAC	Wanted to know projected number of beds for	Shared projected number of beds for Beckley.
VIOIV O OIIICC	Boloics Buill, TVAC	Beckley for years 2012 and 2022.	chared projected number of beds for beckley.
VISN 6 Office	NC American Legion	Wanted to know status of market plan	Responded that CARES workgroup is in initial stages of
VISIN O Office	Department Officer	development. Writes an article for NC Legion	development, and learning to use the model. VISN
	Department Officer	paper; wants to reassure constituency that NC	· · ·
			office will keep in close contact with updates.
\(\(\text{ION}\) \(\text{O}\(\text{II}\) \(\text{O}\(\	A	hospitals will not close.	Description of the tan Dividing to the description of the Description
VISN 6 Office	American Legion's CARES		Responded that a PI will be developed for Beckley.
	liaison for VISN 6	less than 40 beds; will Beckley be closed?	Sent Market Plan Handbook to Legion's liaison, for
			small facility PI development. Explained that no
			decisions have been made at this point, and asked for
			his input as market plan is developed.
VISN 6 Office	Michael McGinnis, Benefits	Received CARES PI mailing from Durham	Told him we would keep him informed, and we
	Manager, City of Durham	VAMC; wanted to know if a reply was required.	appreciated the feedback.
		Offered his assistance to VISN 6 as a good	
		contact for land use discussion.	

VISN 6 Office	Outpatient	Called about CARES after receiving telephone care newsletter article; really had a question about his outpatient care.	Provided info on CARES and contacted his health care provider for question about care.
VISN 6 Office	American Legion's liaison for VISN 6	Concerned about Fayetteville VAMC; said veterans are concerned it might close or become outpatient-only. They've seen the decrease in beds over the years, and it concerns them.	Assured him that Fayetteville remains strong and is not targeted for closure, and that CARES market plan will address needs at Fayetteville. Asked him to relay any other comments he hears.
VISN 6 Office	Member of 'Blue Ridge Advocates for Veterans Opportunities,' Macon County	Read about CARES in Cherokee Scout article; wanted to know potential for CBOC in western North Carolina (specifically Franklin)	Informed him about moratorium on CBOCs; discussed CARES at length, including timeline for market plan development. Mailed CARES packets for his group; agreed to speak with his group if asked.
White City, OR (Dom)	Veteran inpatient	Inquiring as to projected use of the Domiciliary current buildings.	Mentioned Dom considerations has been temporarily tabled this year. Wil be considered in the near future (next year).
White River Jct., VT	State Legislator	Below is what I think I heard expressed at the (expanded membership) Mental Health Council meeting in December:	
		The CARES process originally appeared to be a good model for examining and reallocating resources with the VA hospital system in that it was hoped (and I suppose advertised) that resources would be shifted away from regions where they are redundant and towards regions where they are truly needed.	
		However, there appears that several catch 22's have been built in. Among the aberrations are: 1. Regions (market areas) that are projected to have a decrease in case load need not plan for that decrease and needn't give up and resources, staff, etc., 2. Regions that are projected to see an increased caseload may not plan (expect additional resources) unless a projected 20% increased caseload is met. I guess this means	
		that the White River VA's expected inpatient load of %17 will have to take care of itself, and 3. The reality is that the VA can expect an overall annual budget reduction of %2, annually for the foreseeable future with or with the state of the st	
Wichita, KS	State Commander VFW, Steve Phelps	Thinks CARES is a good process because VA spends too much on maintaining empty buildings - referring to Leavenworth, KS	Informed Director at Leavenworth

Wilmington, DE	Staff from Senator Biden's	Would like to see written explanation of VISN	Explained to the extent possible but they still want to
	office: Tom Lewis (Wilm) and	process. Don't understand why facilities listed	see it in writing from the VISN. Noted comments.
	Dr. A. Glass (DC)	previously as small facility are no longer	
		included. Stated that the Senator does not	
		want to see change in mission at Wilmington.	
		Feel that the VISN's updates don't provide the	
		level of detail they are seeking.	